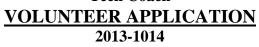


## Youth Advisory Committee's K.E.E.N. Club

## (Kids Enjoy Exercise Now) Teen Coach





	Date
Name	Phone
Address	
Date of Birth	Current Grade
School	Email Address
Emergency contact	Phone
Please list and describe your current extracurricular activities.	
Please describe your previous volunteer experience(s):	
Have you had any experience working or volunteering with children? If so, describe.	
Describe a situation which may demonstrate personal characteristics which make you an outstanding applicant:	
Where did you learn about this program?	

Why do you want to participate in the KEEN Club?	
Considering all of your commitments, including family a	atherings, school work, team sports, volunteer
work, religious/spiritual activities, jobs, internships an	nd other extra-curricular activities, are you
realistically able to commit two hours on two Sundays e	ach month, October through May?
Yes No	
Do you have a valid driver's license? Yes No	
What transportation is available to you?Car	Bus
Additional information you wish to give:	
<b>REFERENCES</b> : Please list at least two people that know y	ou know well and can attest to your character, skill
and dependability.	hone
	hone
P	hone

E-mail TO: karentwoolman@gmail.comwith subject line: KEEN Club Or mail to: Montgomery County Recreation Department, After School Programs, 4010 Randolph Road, Silver Spring, MD 20902

\*\*Application can be found at <a href="www.montgomerycountymd.gov/rec">www.montgomerycountymd.gov/rec</a> click on Things to Do, Teen Activities, Student Learning Opportunities \*\*

**Application deadline: September 16, 2013**